Under the Pap	arwork fit	iduction Act	of 1995,	no persons are n	equired to respon	d 100	a collection of in	Trademack Off Tormation unit	ice; U.S. iss it clap	DEPARTMENT ( ays a valid Calif	control number
Unser the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unbe PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									091400301		
CLAIMS AS FILED - PART I (Column 2)						_	SMALL	ENTITY	<b>O</b> R		R THAN ENTITY
FOR.	MUMBER FILED		MUI	MUMBER EXTRA		RATE	FEE	Ī	RATE	FEE	
BASIC FEE (37 CFR 1.18(a))							-385°		- NATE	17700	
TOTAL CLAIMS OF CFR 1.16(c))	seinus 20 a		m. T.		1	19.0°	-1200		×180.		
NOEPENDENT C	<del> </del>				1	.430	<del> </del>	OR		├──	
(37 CFR 1.16(b))	minus 3 =		3-1.	<u> </u>		× 200-	<b></b>	OR	× :86°	<b> </b>	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))							+ = 1450	<u> </u>	OR	+=220.	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	
	CLAIN	IS AS AM	ENDE	) - PART II							
	(Catur			(Column 2	(Column 3)		SMALL	ENTITY	1		R THAN ENTITY
A F	R	CLAIMS MAINING AFTER ENDMENT		HIGHEST MAMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	SAGA PAGA PAGA		RATE	ADDI- TIONAL FEE
Total (programmy programmy		27	Minus	75	1.0	11	× 9/1-	17 3	X	×18 -	76 10
Z Independent	. [	F	Minus	*3	1.	11	x . 46 .		OR	x 5 86 .	7-
FRET PRESENTATION OF MULTIPLE DEPENDENT CLAMM (STORE 1.16(d))							/A.		OR	+,290.	
1 1							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
1	(C)	otumo 1)		(Cotumo 2	(Column 3)				•		
<b>a</b> l	7	LAMS MAINING.		HIGHEST	PRESENT	lſ					
Z	1 7	FIER		PREVIOUSLY PAGE 1908		П	RATE	ADDI- TIONAL FEE		RATE	ADDL TIONAL
Total Or csin 1.15(c) Z Independent	7-7	74	Minor		11.	ŀ	9.	HEE	-	.18	FEE
Z Interendent	1.	7	Minus		<del> /-</del>	lŀ	113		OR	x = 26 ·	
3						H	110 .		OR	. 290.	-/
FIRST PRESENTATION OF MULTIPLE DEPENDENT COOM (37 CFR 1 (4d))							+#42 ·	——	OR	TOTAL	/
•							ADO'L FEE		OR	ADDLFEE	
(Column 1) (Column 2) (Column 3)											
2	RC)	LAMS WARNING FTER NOMENT		HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RAIE	ADDI- TIONAL FEE
Total	1.		Minus	**	1.	ı	x 9 .		OR	25/8.	
Total			Minus	***	1.	ı	× 43.		OR	× 9%0 -	
FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))							.145.		OR	+ 290.	
							TOTAL ADDL FEE		OR	TOTAL ADDLEE	
If the entity or column 1 is loss than the entry or column 2, write "D" or column 1  If the "rightest founder Previously Paid For" in THIS SPACE is less than 30, enter "20",  If the "Rightest Month or Previously Paid For" IN THIS SPACE is less than 3, enter "20",											
The Michest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.											

This creterion of information is requised by 37 CER 1.56. The information is required to obtain or retain a benefit by the public which is to the (and by the VERTO to process) as application. Condelmentally in generated by 31 LSR 1.16. The 22 and 31 CER 1.16. The condenses are settled to take 17 certain to complete which complete the complete of the complete the complete the complete of the complete the compl

If you need assistance in completing the form, call 1-800-PTO-9199 and select option